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**REQUEST FOR WITHDRAWAL  
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Application Number	09/852,547
Filing Date	May 10, 2001
First Named Inventor	David Sirbasku
Art Unit	1642
Examiner Name	Karen A. Canella
Attorney Docket Number	1944-00800

To: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Please withdraw me as attorney or agent for the above identified patent application, and

- ☐ all the attorneys/agents of record,  
☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or  
☒ the attorneys/agents associated with Customer Number **23505**

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are:

Request by the Applicant/Inventor

**CORRESPONDENCE ADDRESS**

1. ☐ The correspondence address is NOT affected by this withdrawal.  
 2. ☒ Change the correspondence address and direct all future correspondence to:

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OR

☒ Firm or Individual Name David A. Sirbasku, Ph.D.

Address Biopharma Global LLC  
8714 West Royal Lane

City Irving State TX ZIP 75063

Country USA

Telephone 972-871-0100 Fax 972-871-0122

Signature *Carol G. Mintz*

Name Carol G. Mintz Registration No. 38,561

Date Feb. 7, 2005 Telephone No. 713-238-8000

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

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